## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED May 06, 2008 8:00 am Secretary of State

		AITHUAL	KEFOKI						ary Or s	Juni	
DOCUMENT # L07000083191  1. Entity Name ANTHONY J. REED, LLC									90007 005 **	*138.75	
Principal Plac	a of Business		Mailing Address				1 (	30039677			
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JACKSONVILI	.E, FL 3221	8	JACKSONVILLE, FL 32	218							
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		ess - No P.O. Box #	3. Mailing Address							l	
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Suite, Apt.	#, etc.		Suite, Apt. #, etc.				04292008	Chg-LLC	CR2E083 (12/0	)6)	
SACK	Poprell	E, FL	JACKSONVIllE, FL				4. FEI Num	Der 26-018	39926	Applied Fo	
	18-1155 COUSA		32218-1155 COU			5. Certificate of Status Desired		<b>□</b> \$5.00	\$5.00 Additional Fee Required		
		and Address of Current	Registered Agent	L			7. Name ar	d Address of New Re			$\dashv$
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JACKSON											
3/10/100/1	* (CCC, ) C	32210				<1.	70/4	VNIE ROA	ŀΛ		
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				1	City	JA	CKJON	VILLE	FL   <i>3</i> 2	2118-1	/55
8. The above	named entity	submits this statement fo	the purpose of changing its	registered	office o						
	ions of regis			NTHON							
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SIGNATURE .	Signalize, typed	or printed frame of registered agent a	and late if applicable. (NOT	E: Registered Ac	cent signal	ure required	when reinstating)		DATE		
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FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75									check payable Department of S		
9.		MANAGING MEMBE	RS/MANAGERS	10.				ADDITIONS/	CHANGES		$\neg$
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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

ANTI-ON OF THE STATUTE OF TH

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: ING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS

CITY-ST-ZIP